

CITY OF LANESBORO

Phone 507-467-3722

Fax 507-467-2557

Box 333, 202 Parkway So.

Lanesboro, MN 55949

CITY OF LANESBORO: JOB APPLICATION

GENERAL INSTRUCTIONS FOR COMPLETING APPLICATION

1. Read the job announcement carefully to be sure that you meet all requirements.
2. Fill out a separate application form for each position you are applying for, unless otherwise directed by the job announcement. Be sure to read the application form carefully and completely and sign your name in the appropriate places.
3. Complete the "Employment History" section in its entirety. Applications that are incomplete may lose credit or be completely removed from further consideration.
4. Applications are accepted only for the job posted and must be postmarked by the closing date.
5. Please print clearly with ink or type.

TENNESSEN WARNING

In accordance with the Minnesota Government Data Practices Act, the City of Lanesboro is required to inform you of your rights as they relate to the private information collected from you. Minnesota Statutes 13.04 and 13.43 are two sections that govern what affects you as an applicant for employment with the City of Lanesboro. Private data is information which is available to you, but not to the public. The personal information we collect about you is private. All data collected is considered private except for the following:

1. Your veteran's status
2. Your rank on our eligibility list
3. Your job history
4. Your education and training
5. Your work availability

Initially, your name is considered private information. However, if you are selected to be interviewed as a finalist, your name becomes public information.

The data supplied by you may be used for such purposes as may be determined to be necessary in the administration of policies, rules and regulations of the City of Lanesboro. Furnishing social security numbers, date of birth (unless a minimum age is required), sex, age group, and disability data is voluntary, but refusal to supply other requested information may mean that your application for employment may not be considered.

Private data is available only to you, to appropriate city employees, and others as provided by state and federal law who have a bona fide need for the data. Public data is available to anyone requesting it and consists of all data furnished in the application for employment which is not designated in this notice as private data.

Except for race, sex, age, and disability data, the information you give us about yourself is needed to identify you and to assist the City of Lanesboro in determining your suitability for the position for which you are applying.

I declare that I have read and understand the information given above regarding the Minnesota Government Data Practices Act.

Applicant Signature

CITY OF LANESBORO: JOB APPLICATION FORM

PERSONAL INFORMATION:

Date: _____

Name: _____

Last

First

Middle

Present Address: _____

Permanent Address: _____

E-mail Address: _____

Are you 18 years or older? Yes _____ No _____ Phone # () _____

EMPLOYMENT DESIRED

Position _____ Date you can start _____ Salary _____

Have you applied for a position here before? Yes _____ No _____ If yes, give date _____

Have you ever been employed here before? Yes _____ No _____ If yes, give date _____

Are you now employed? Yes _____ No _____ If yes, may we contact your employer? _____

Are you available to work FULL-TIME _____ PART-TIME _____ TEMPORARY _____

List hours available _____

EDUCATION

NAME AND LOCATION

#OF YEARS ATTENDED

DIPLOMA

| | | |
|---------------|--|--|
| HIGH SCHOOL | | |
| COLLEGE/TRADE | | |
| OTHER | | |

Special Skills and Qualifications _____

List Licenses held relevant to employment:

TYPE

NUMBER

CLASS

EXP DATE

| | | | |
|--|--|--|--|
| | | | |
| | | | |

EMPLOYMENT EXPERIENCE

Please list last 3 employers, present or most recent employer first

| | | | |
|-----------------------|----------------|--------------------|----|
| Employer | Dates Employed | From | To |
| Address | | Phone Number | |
| Job Title | | Supervisor's Title | |
| Description of Duties | | | |
| Reason(s) for Leaving | | Hourly Rate | |

| | | | |
|-----------------------|----------------|--------------------|----|
| Employer | Dates Employed | From | To |
| Address | | Phone Number | |
| Job Title | | Supervisor's Title | |
| Description of Duties | | | |
| Reason(s) for Leaving | | Hourly Rate | |

| | | | |
|-----------------------|----------------|--------------------|----|
| Employer | Dates Employed | From | To |
| Address | | Phone Number | |
| Job Title | | Supervisor's Title | |
| Description of Duties | | | |
| Reason(s) for Leaving | | Hourly Rate | |

Personal References

| Name | Address | Phone | # of yrs acquainted |
|------|---------|-------|---------------------|
| | | | |
| | | | |
| | | | |

I authorize investigation of all statements contained in this application for employment as may be necessary to determine eligibility for employment. I certify that answers given herein are true and complete to the best of my knowledge and I understand that, if hired, falsified statements on this application shall be grounds for dismissal. I understand and agree that, if hired, my employment is for no definite period and may be terminated at any time.

Signature

Date